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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. Further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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32615 7590 03/22/2004

OSHA & MAY L.L.P./SUN  
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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Tawana L. Garcia (Depositor's name)  
 Tawana L. Garcia (Signature)  
 May 27, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/997,438	11/29/2001	Sudhakar Bobba	03226/147001;P6841	3433

TITLE OF INVENTION: 150 DEGREE BUMP PLACEMENT LAYOUT FOR AN INTEGRATED CIRCUIT POWER GRID

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CRUZ, LOURDES C	2827	257-786000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 OSHA & MAY L.L.P.  
 2  
 3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sun Microsystems,

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies 2

## 4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

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06/03/2004 HAL122 00000135 09997438

01 FC:1501 1330.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 6.00 OP

TRANSMIT THIS FORM WITH FEE(S)

## TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)

(37 C.F.R. 1.311)

Docket No.

03226/147001

Applicant(s): Sudhakar BOBBA, et al.

Serial No.

09/997,438

Filing Date

November 29, 2001

Examiner

Lourdes C. Cruz

Group Art Unit

2827

Confirmation No.

3433

Invention: 150 DEGREE BUMP PLACEMENT LAYOUT FOR AN INTEGRATED CIRCUIT POWER GRID

Mail Stop Issue Fee  
TO THE COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

32615

Patent and Trademark Office

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1330.00 ☐ Design Fee: ☐ Plant Fee:
- ☒ Publication Fee: \$ 300.00
- ☒ A check in the amount of \$1,636.00 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-0591 as described below.
- ☐ Charge the amount of
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

Signature

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Tawana L. Garcia

Signature of Person Mailing Correspondence

Tawana L. Garcia

Typed or Printed Name of Person Mailing Correspondence